

Work Order ID 91975

October-19-12 12:46:25 PM

91975

Page 1

Item ID: 647.0112

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Strut Bracket

Stop

NS2

Start Date: 18/10/2012 Start Qty: 8.00

8

Cust Item ID:

Required Date: 01/11/2012 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12-10-19 Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
647.0100	A								
100		0.00							
100	FLOW WATER JET								
Waterjet	Memo	0.00							
FLOW CNC Waterjet	1-Cut as per Dwg								
	Dwg Rev: A								
384 . 080	Prog Rev: A								
	2-Deburr if necessary								
110	QC2- Inspect parts off machine FAI/FAIB	0.00							
110									
QC	Memo	0.00							
Quality Control									

(14)

12-10-22

(14)

12-10-22

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS					
		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									
FAULT CATEGORY									
Landing Gear	General								
	<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced				
	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure				
	<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld				
	<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled				
	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved					
	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong					
	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge					
	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset						
	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration						
	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence						
	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions						

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Page 2

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8

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

QC8- Inspect parts - second check

0.00

SMB
12/10/22

14

120

QC

Quality Control

130

Form as per dwg

0.00

FF

130

Brake NC

NC BRAKE

Brake NC

Memo

USE DT9834 FOR FORMING

14 - 0 - 0 - 12-10-24

140

QC5- Inspect part completeness to step on W/O

0.00

SMB
12/10/24***140***

QC

Quality Control

0.00

14 - 0 - 0 -

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order ID 91975

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Page 3

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NS2

Start Date: 18/10/2012 Start Qty: 8.00

8

Cust Item ID:

Required Date: 01/11/2012 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150 *150* SprayPaint Spray Painting	Memo PRIME AS PER DWG NOTE 6 PR-148 PRIMER BATCH: <u>123693</u>	0.00				14	0	0	Ad 12-12-15
160 *160* QC Quality Control	QC14- Inspect Spray Paint Memo	0.00 0.00				14			DAS 05 8-89 12-12-18
170 *170* Packaging Packaging	Identify as per dwg & Stock Location: <u>138A</u> Memo ***IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV***	0.00 0.00				14			Per 13/10/18 (4)

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear				General						
				Bending <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>			
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>							
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>							
Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>							
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Part Moved <input type="checkbox"/>								
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>								
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>							
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>									
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>									
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>									
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>									

Work Order ID 91975

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91975

Page 4

Item ID: 647.0112

Accept

N900040100

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Start

NS1

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Item Name: Strut Bracket

Stop

NS2

Start Date: 18/10/2012 Start Qty: 8.00

8

Cust Item ID:

Required Date: 01/11/2012 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

13/10/10
MF
13-01-09

Reject
Number

Insp.
Stamp

180

180

QC

Quality Control

Memo

0.00

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS						
Part No. _____		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear				General						
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio						
				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge						
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled						
				<input type="checkbox"/> Other						

Picklist Print

October-19-12 12:46:29 PM

Page 1

Work Order ID: 91975

91975

Parent Item: 647.0112

647 0112

Parent Item Name: Strut Bracket

Start Date: 18/10/2012

Required Date: 01/11/2012

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP REV:A 12.08.14 NEW ISSUE DD VERF:JFS

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304S14GA		Purchased		No		100	sf	37.3400	0.0325	0.273684	5	18/10/2012	5

M304S14GA

304SS sheet .080

Location	Loc Qty	Loc Code
MAT020	37.34	
117933	3.6	
119276	33.74	

(14)

119276

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS								
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other			

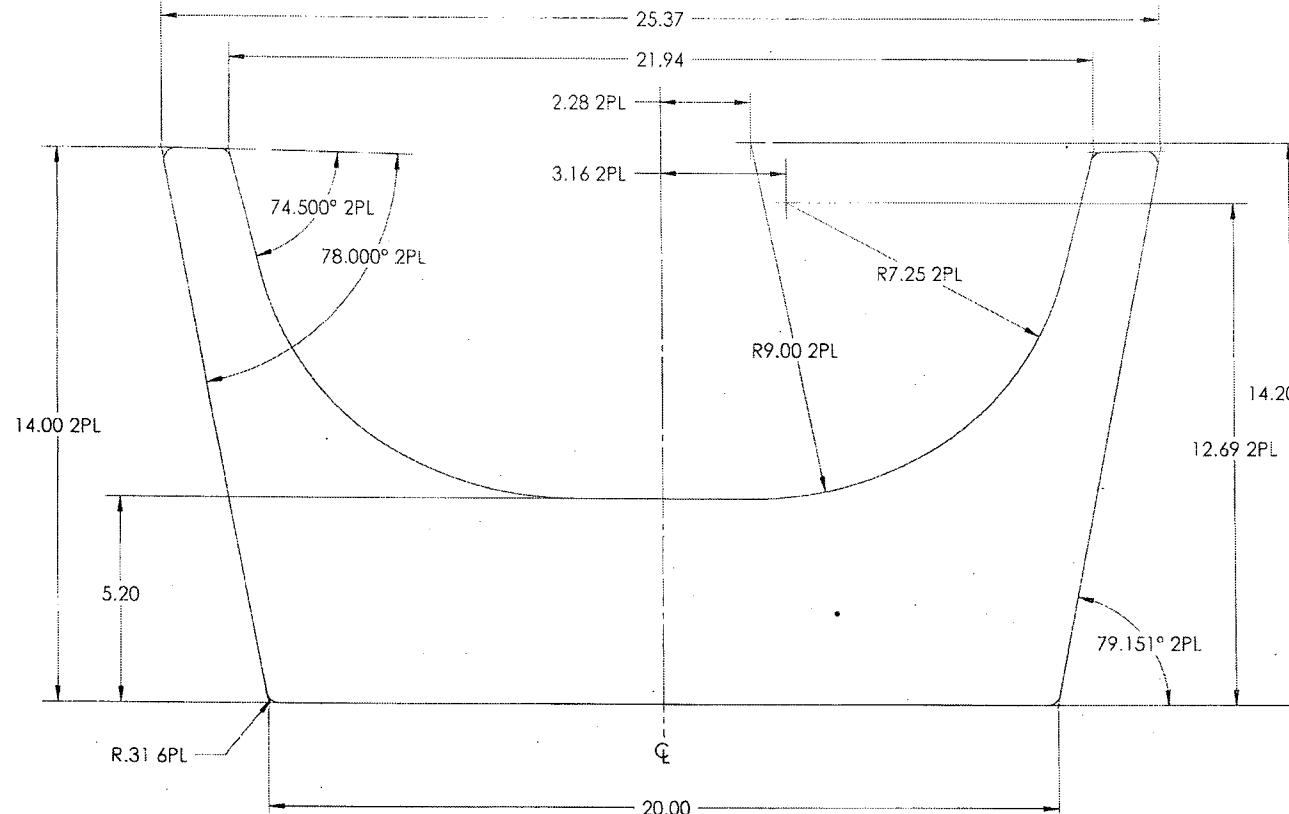
DART AEROSPACE LTD	Work Order:	91975
Description: STRUT BRACKET	Part Number:	647-0112
Inspection Dwg: 647-0112 Rev: A		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

Measured by: <u>B</u>	Audited by: <u>SMP</u>	Preliminary Approval:
Date: <u>12-10-22</u>	Date: <u>12/10/22</u>	Date:

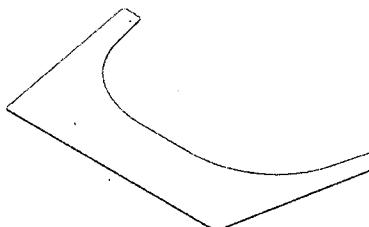
Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

10.04.15



NOTES:

- ① MATERIAL: ALUMINUM 2024-T3 PER AMS-QQ-A-250/4
- ② FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK; PRETREAT PR-148 ADHESION PROMOTER; PRIME IAW MIL-P-2337J TYPE I CLASS N.
- 3. DEBURR AND BREAK ALL SHARP EDGES.
- 4. IDENTIFY IAW MPP-120.
- ⑤ MATERIAL: 304 SS IAW AMS 5643.
- ⑥ FINISH: PRIME IAW MIL-P-2337J TYPE I CLASS N.

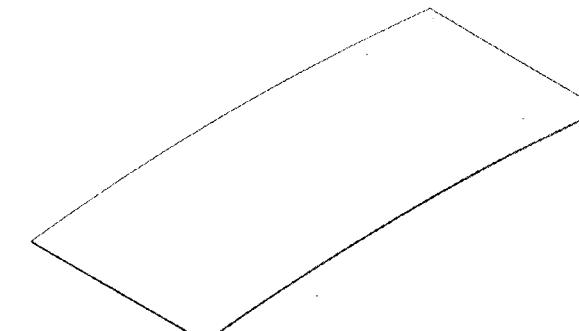
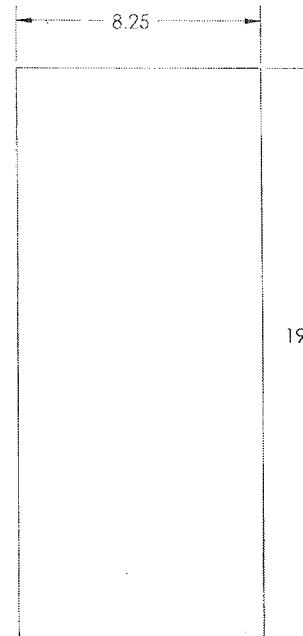
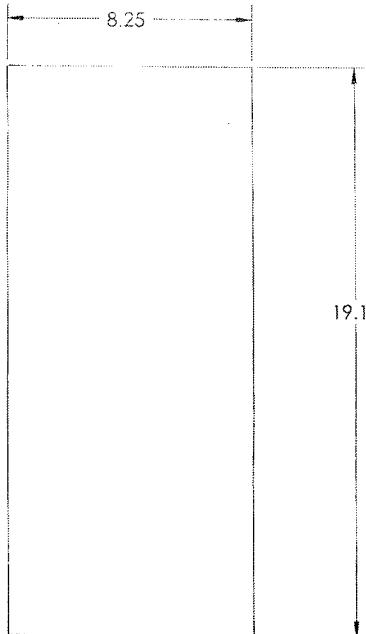


647.0110

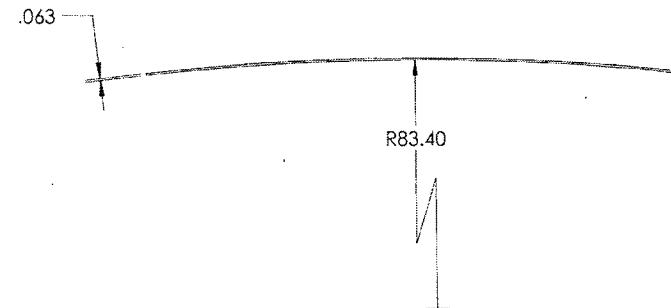
		647.0116	DOUBLER	△	
		647.0115	CLIP	△	△
		647.0114	CLIP	△	△
		647.0113	STRUT DOUBLER	△	△
		647.0112	STRUT BRACKET	△	△
		647.0111	PANFL.	△	△
		647.0110	ROOF DOUBLER	△	△
	FIND #	PART #	DESCRIPTION	MATL	SPEC.
QTY			PARTS LIST		
NEXT ASSY (S)		ORIGINAL DATE 05-28-97	REVISIONS 0	REVISIONS 0	APICAL INDUSTRIES
646.9500		DRAWING NO. F.1001-10	CHECKED P. BRAVO	DRAWING APPROVAL 05-28-97	2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300
		CONTRACT NO.	SHEETMETAL		
		UNLESS OTHERWISE SPECIFIED DRAWINGS ARE IN INCHES ALL DIMENSIONS ARE IN INCHES TOLERANCE = .01 3 PLACE DECIMAL = .005	ENCL	PAGE CODE	EWL
			B	074126	647.0100
				SCALE: NO SCALE	REV. A

1 2 3 4 5 6 7 8 91975

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FLAT PATTERN

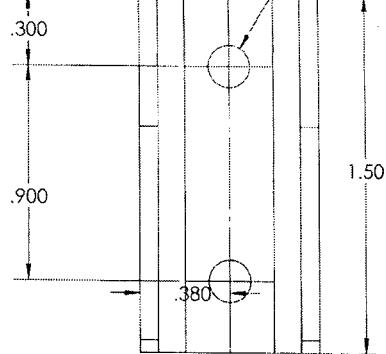


ORIGINAL DATE MAY 24 1980	RELEASER P. ROLING
RELEASER P. ROLING	DRAWING APPROVAL B. ROLING
CONTRACT NO.	
UNLESS OTHERWISE SPECIFIED TOLERANCES ARE IN INCHES	
2 PLACE DECIMALS ±.00	
ANGLES ± 5°	
REV C 07M26	DOC. NO. 647.0100
SCALF: NONE	REV A
SHEET 2 OF 6	

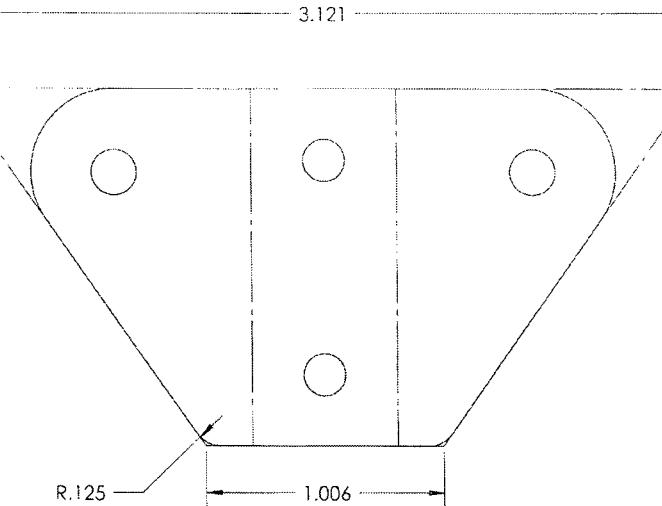
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91975

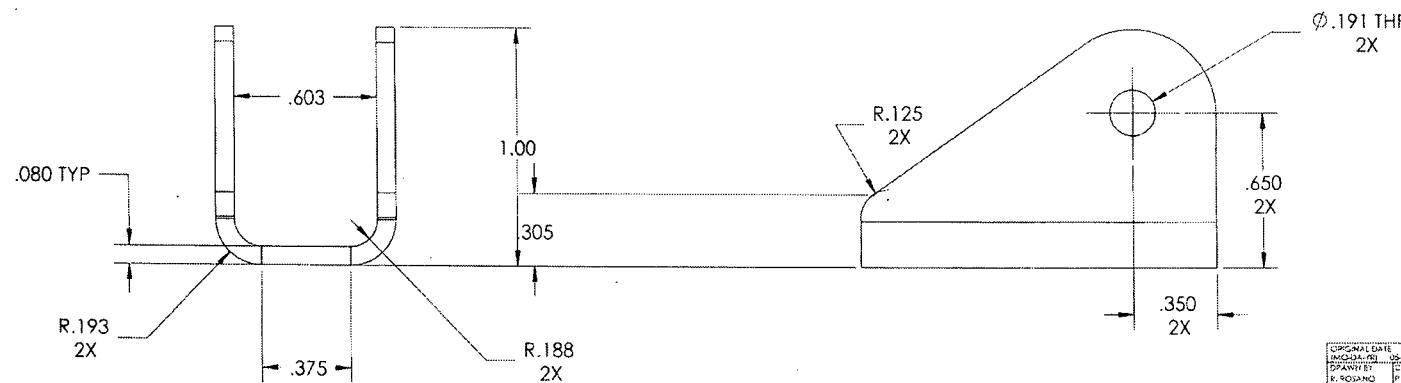
①.177 THRU
2X



FLAT PATTERN



647.0112

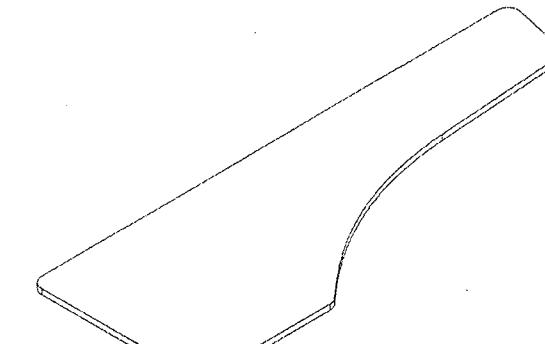
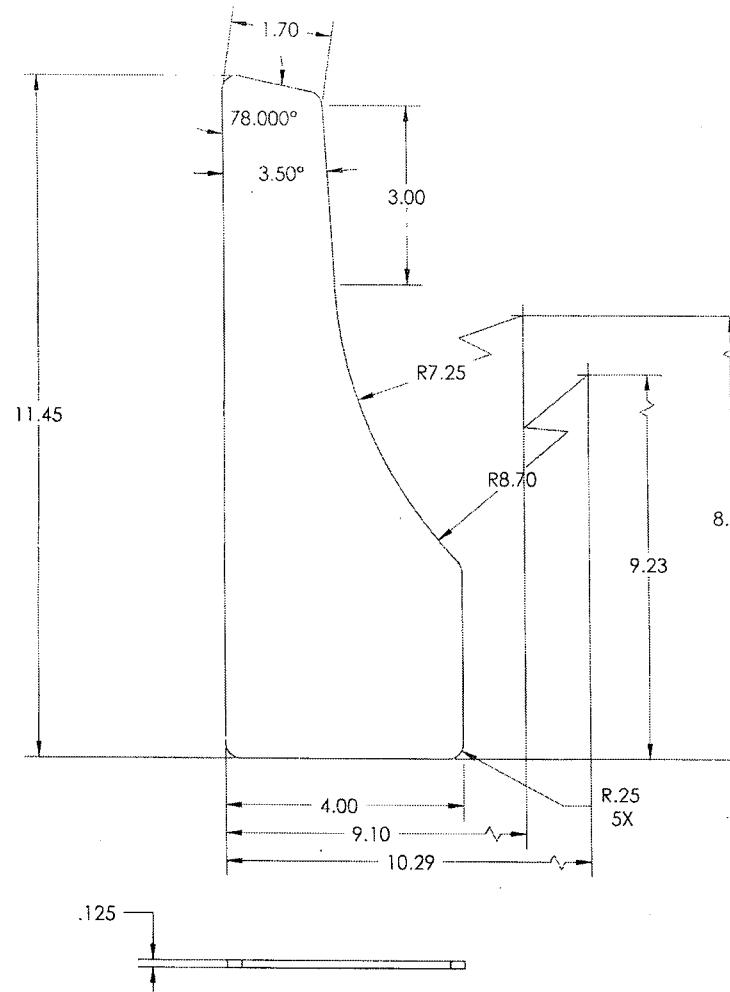


ORIGINAL DATE 05-05-92	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA 92056-3512 (760)724-5300
K. RODRIGO P. BRAVO	DRAWING APPROVAL P. BRAVO
CONTRACT NO.	
UNLESS OTHERWISE SPECIFIED ALL DIMENSIONS ARE IN INCHES. ALL TOLERANCES ARE INCHES. ALL MATERIALS ARE STRUCTURAL STEEL. ANGLES 1" x 1"	
REV. CODE: B DATE: 07/26	ENG. NO. 647.0100 A SCALE: NONE SHEET 3 OF 6

1 1 2
3 4 5 6 7 8
91975

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REVISIONS	REVISION DATE	REVISION BY	APPROVED

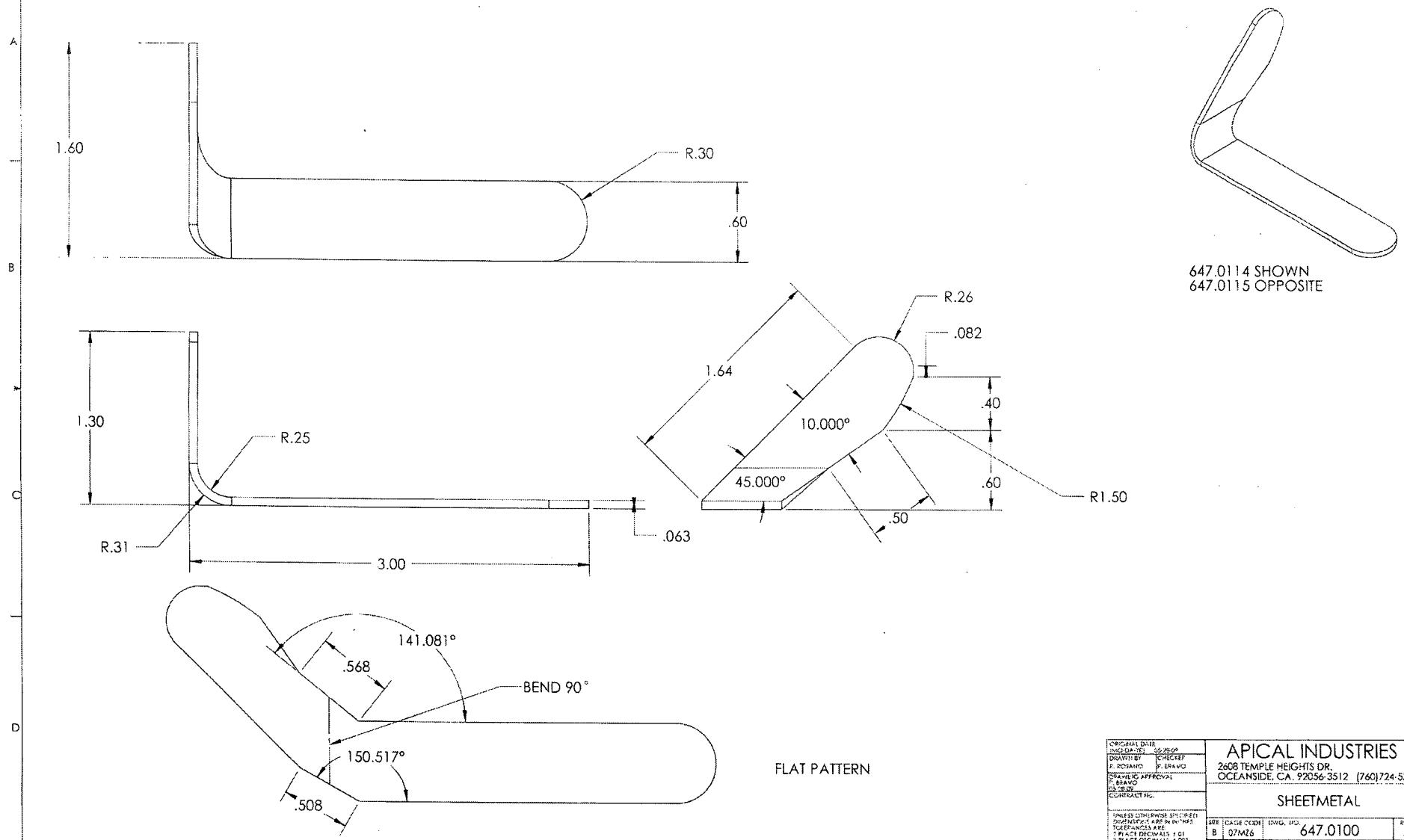


ORIGINAL DATE 05-28-07 DRAWING NUMBER D-RODIN-1 DRAWINGS APPROVAL P. BRAVO CONTRACT NO.	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300
	SHEETMETAL
UNITS: INCHES TOLERANCES: .010 TOLERANCES ARE 2 PLACE DECIMAL: 1.01 3 PLACE DECIMAL: 1.001 4 PLACE DECIMAL: 1.0001 5 PLACE DECIMAL: 1.00001	REV: B DATE CODE: 07M26 DWG. NO: 647.010.J SCALE: NONE SHEET: 4 OF 6

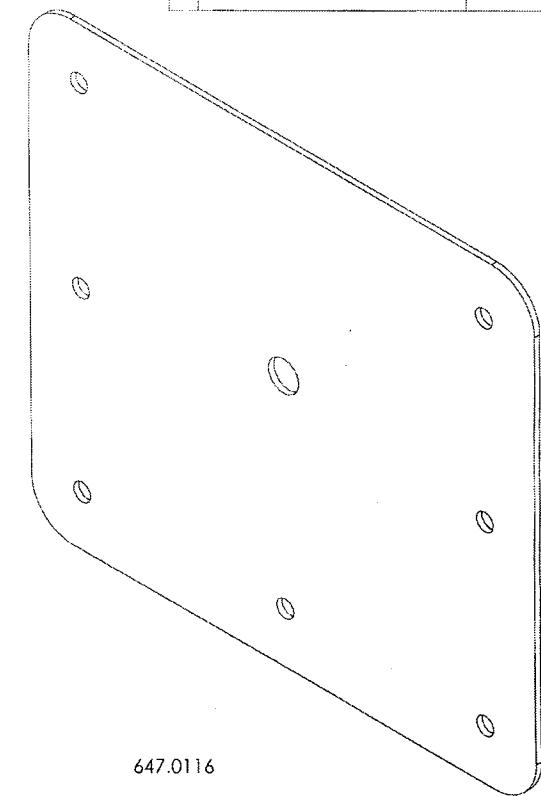
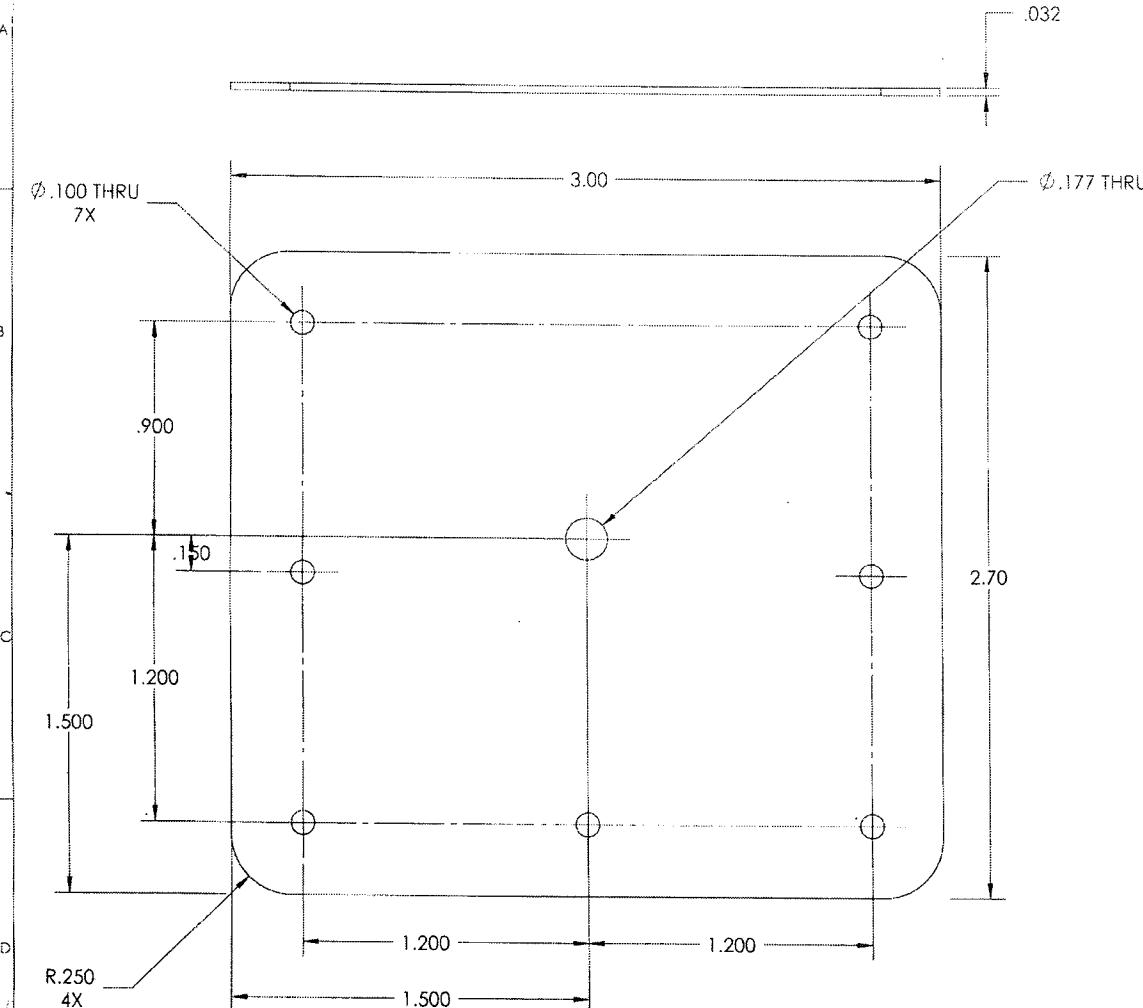
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WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES & PROTECTED.

1	2	3	4	5	6	7
1	2	3	4	5	6	7
1	2	3	4	5	6	7
1	2	3	4	5	6	7
1	2	3	4	5	6	7

91975



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APICAL INDUSTRIES INC. PART OF VULCAN MATERIALS
THE DRAFTER'S RESPONSIBILITY IS TO GUARANTEE ITS ACCURACY.



DRAWN BY	checked	REVISION
R. ROSENBLUM	P. BRAVC	
DRAWING APPROVAL		
05-26-02		
CONTRACTING		
UNLESS OTHERWISE SPECIFIED DRAWINGS ARE IN INCHES 1/8" TOLERANCES ARE 1/16" FOR 1/2" & OVER 1/32" FOR 1/2" & LESS 3 PLACE DECIMALS +000		
REV.		
1/2" CAGE CODE	647.0100	REV. A
B 07M26		
SCALE NONE	1 SHEET	6 OF 6

APICAL INDUSTRIES

2608 TEMPLE HEIGHTS DR.
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